

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

ADDRESS (number and street) ▼

100 Endo Boulevard

☐ Check if different than previously reported. (ACC)

Chadds Ford

PA

19317

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00452052

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joseph Rosenthal

Signature of Treasurer

Joseph Rosenthal

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		76241.12
(b) Cash on Hand at Beginning of Reporting Period.....	45253.10	
(c) Total Receipts (from Line 19)	10955.66	39017.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	56208.76	115258.76
7. Total Disbursements (from Line 31)	13500.00	72550.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42708.76	42708.76
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 04 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y
 04 / 30 / 2012
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6528.66

18821.98

(ii) Unitemized

4427.00

20195.66

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

10955.66

39017.64

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

10955.66

39017.64

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

10955.66

39017.64

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

10955.66

39017.64

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	63000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	4500.00	9550.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13500.00	72550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13500.00	72550.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10955.66	39017.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10955.66	39017.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Karen Adler

Mailing Address 12 Oak Leaf Lane

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

SVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53202

Amount of Each Receipt this Period

84.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Robert Barto

Mailing Address 7 Fawns Path

City

Lincoln University

State

PA

Zip Code

19352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

VP Regulatory Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53066

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Geoffrey Becker

Mailing Address 2480 Pale Tiger Court

City

TALLAHASSEE

State

FL

Zip Code

32309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Dir Regional Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53167

Amount of Each Receipt this Period

150.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

484.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Timothy Byrne

Mailing Address 8050 Fair View Lane

City

Norristown

State

PA

Zip Code

19403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Sr Dir Public Policy

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C53149

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Edward Carr

Mailing Address 1039 Catherine Ave

City

Lagrange

State

IL

Zip Code

60525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceutical Solutions, Inc.

Occupation

Dir Integrated Sales Strategies

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C52986

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Robert Cobuzzi Jr.

Mailing Address 1822 Masters Way

City

Chadds Ford

State

PA

Zip Code

19317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

SVP Corporate Development

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C53121

Amount of Each Receipt this Period

120.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

470.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Lawrence Cunningham

Mailing Address 700 Kyle Lane

City State Zip Code
 Ambler PA 19002

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

EVP, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 06 / 2012

Transaction ID : C52685

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Clint Davis

Mailing Address PO Box 5949

City State Zip Code
 Austin TX 78763

FEC ID number of contributing federal political committee.

C

Name of Employer

HealthTronics

Occupation

SVP & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C52981

Amount of Each Receipt this Period

200.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Debra Dingess

Mailing Address 302 Chestnut Lane

City State Zip Code
 Statesville NC 28625

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Specialty Sales Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : C53051

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 18
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Guy Donatiello

Mailing Address 321 North Ithan Ave

City State Zip Code
 Rosemont PA 19010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Endo Pharmaceuticals

Occupation
 VP Intellectual Property

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53032

Amount of Each Receipt this Period

60.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Ivan Gergel

Mailing Address 1352 Le Boutillier Road

City State Zip Code
 Malvern PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Endo Pharmaceuticals

Occupation
 EVP R&D & Chief Scientific Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53154

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Sandeep Gupta

Mailing Address 6 Birch Drive

City State Zip Code
 Plainsboro NJ 08536

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Endo Pharmaceuticals

Occupation
 SVP Disc & Early Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53037

Amount of Each Receipt this Period

166.66

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

476.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. David Holveck

Mailing Address 916 Brushtown Road

City

Ambler

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53048

Amount of Each Receipt this Period

416.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Sarah Kan

Mailing Address 109 Connolly Drive

City

Milltown

State

NJ

Zip Code

08850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Dir Regional Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53179

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Alan Levin

Mailing Address 116 East 66th Street

City

New York

State

NY

Zip Code

10065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

EVP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53056

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

916.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Martin Lutz

Mailing Address 609 Lippincott Ave

City

Moorestown

State

NJ

Zip Code

08057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceutical Solutions, Inc.

Occupation

VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C53003

Amount of Each Receipt this Period

200.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Caroline Manogue

Mailing Address 302 Keithwood Road

City

Wynnewood

State

PA

Zip Code

19096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

EVP Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C53100

Amount of Each Receipt this Period

416.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Julie McHugh

Mailing Address 1421 Parsons Lane

City

Ambler

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : C53047

Amount of Each Receipt this Period

250.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

866.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Cornelius Merlini

Mailing Address 1521 Temple Drive

City State Zip Code
 Maple Glen PA 19002

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

SVP Laboratory Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53084

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. James Munroe

Mailing Address 9447 Brenner Court

City State Zip Code
 Vienna VA 22180

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

SVP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53050

Amount of Each Receipt this Period

166.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Jonathan Neely

Mailing Address 2514 Pine Street

City State Zip Code
 Philadelphia PA 19103

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Dir Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2012

Transaction ID : C53078

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

366.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 18

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Candice Phipps

Mailing Address 565 Pennsylvania Ave., NW

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Dir Regional Govt Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 30 2012

Transaction ID : C53178

Amount of Each Receipt this Period

300.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B. Sujat Sukthankar

Mailing Address 43 Magnolia Way

City State Zip Code
Chadds Ford PA 19317

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

VP Devices R&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 30 2012

Transaction ID : C53025

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

C. Gregory Thomas

Mailing Address 1522 Sylvan Drive

City State Zip Code
West Chester PA 19380

FEC ID number of contributing federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Sr State Govt Affairs Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 30 2012

Transaction ID : C53141

Amount of Each Receipt this Period

150.00

* Payroll Deduction:

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 18

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Catharine Trzaskawka

Mailing Address 18 Pendleton Court

City

Medford

State

NJ

Zip Code

08055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Endo Pharmaceuticals

Occupation

Dir External Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2012

Transaction ID : C53153

Amount of Each Receipt this Period

100.00

* Payroll Deduction:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

6528.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. CHARLIE DENT FOR CONGRESS

Mailing Address PO Box 442

City	State	Zip Code
Allentown	PA	18105

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Charles W. DentCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2012

Transaction ID : D612

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ALTMIRE

Mailing Address P.O. Box 1776

City	State	Zip Code
Freedom	PA	15042

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Jason AltmireCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2012

Transaction ID : D617

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOE PITTS

Mailing Address PO BOX 775

City	State	Zip Code
Unionville	PA	19375

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Joseph R. PittsCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2012

Transaction ID : D619

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. VOLUNTEERS FOR SHIMKUS

Mailing Address PO Box 661

City	State	Zip Code
Collinsville	IL	62234

Purpose of Disbursement
Contribution

Candidate Name

Rep. John Shimkus

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 19

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		13		2012

Transaction ID : D618

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

9000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DOMINIC PILEGGI

Mailing Address 101 W BALTIMORE AVE, 2ND FL

City Media	State PA	Zip Code 19063
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Purpose of Disbursement
Contribution - PA State Senate District 9

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2012

Transaction ID : D613

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DUANE MILNE

Mailing Address 16 FAIRVIEW ROAD

City Paoli	State PA	Zip Code 19301
---------------	-------------	-------------------

Purpose of Disbursement
Contribution - PA State Representative District 167

Candidate Name

DUANE MILNEOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2012

Transaction ID : D616

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Friends of Senator Jack Martins

Mailing Address 211 Denton Avenue, Suite 117

City Garden City	State NY	Zip Code 11040
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Purpose of Disbursement
Contribution - NY State Senate District 7

Candidate Name

Jack MartinsOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2012

Transaction ID : D620

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3750.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Endo Pharmaceuticals Inc Political Action Committee (ENDO PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Warren Kampf

Mailing Address P.O. Box 1439

City	State	Zip Code
Paoli	PA	19301

Purpose of Disbursement
Contribution - PA State Representative District 157

Candidate Name

Warren KampfOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2012

Transaction ID : D615

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. People for Matt Baker

Mailing Address PO Box 602

City	State	Zip Code
Wellsboro	PA	16901

Purpose of Disbursement
Contribution - PA State Representative District 69

Candidate Name

Matt BakerOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2012

Transaction ID : D614

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

4500.00
